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STATEMENT OF

- SECRETARY OF THE SENATE 18 OCT 10 AM 9: 55

FORM 1		ORGANIZA		Office Use Only	
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Frien	đs of Maj	cia, , , , , ,		1 1 1 1 1	
	<u> </u>	D.O. Box 1:	7740		
ADDRESS (number a	nd street)	P.O. Box 12	2/40		4 []]]] [
(Check if a is changed)		Seattle		WAJ [98111 -
COMMITTEE'S E-MA	AIL ADDRESS	,	CITY	STATE	ZIP CODE
	y@caleyc	pas,com	1 1 1 1 1 1 1 1 1 1 1		
	<u> </u>		<u> </u>		
COMMITTEE'S WEE	antwell.c	com			
2. DATE 1	0 10°	2008			
3. FEC IDENTIFIC	CATION NUMBE	R C 0	0349506		
4. IS THIS STATE	MENT	NEW (N) OR	X AMENDED (A)		
I certify that I have of			of my knowledge and belief	it is true, correct a	and complete.
Signature of Treasure	er A	EHERSON		Date [10	10 2008
NOTE: Submission of			may subject the person signing		he penalties of 2 U.S.C. §437g.
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 12/2007)